#### § 606.140

- (5) Instructions to store at room temperature after thawing and to begin administration as soon as possible but no more than 4 hours after entering the container or after pooling and within 6 hours after thawing.
- (6) A statement that 0.9 percent Sodium Chloride Injection U.S.P. is the preferred diluent.
- (7) Adequate instructions for pooling to ensure complete removal of all concentrated material from each container.
- (8) The statement: "Good patient management requires monitoring treatment responses to Cryoprecipitated AHF transfusions with periodic plasma factor VIII or fibrinogen assays in hemophilia A and hypofibrinogenemic recipients, respectively."

[50 FR 35470, Aug. 30, 1985, as amended at 53 FR 116, Jan. 5, 1988]

EFFECTIVE DATE NOTE: The information collection requirements contained in  $\S 606.122$  will not become effective until OMB approval has been obtained. FDA will publish a notice of OMB approval in the FEDERAL REGISTER.

# **Subpart H—Laboratory Controls**

### §606.140 Laboratory controls.

Laboratory control procedures shall include:

- (a) The establishment of scientifically sound and appropriate specifications, standards and test procedures to assure that blood and blood components are safe, pure, potent and effective
- (b) Adequate provisions for monitoring the reliability, accuracy, precision and performance of laboratory test procedures and instruments.
- (c) Adequate identification and handling of all test samples so that they are accurately related to the specific unit of product being tested, or to its donor, or to the specific recipient, where applicable.

### §606.151 Compatibility testing.

Standard operating procedures for compatibility testing shall include the following:

(a) A method of collecting and identifying the blood samples of recipients to ensure positive identification.

- (b) The use of fresh recipient serum samples less than 48 hours old for all pretransfusion testing.
- (c) The testing of the donor's cells with the recipient's serum (major crossmatch) by a method that will demonstrate agglutinating, coating and hemolytic antibodies, which shall include the antiglobulin method.
- (d) A provision that, if the unit of donor's blood has not been screened by a method that will demonstrate agglutinating, coating and hemolytic antibodies, the recipient's cells shall be tested with the donor's serum (minor crossmatch) by a method that will so demonstrate.
- (e) Procedures to expedite transfusions in life-threatening emergencies. Records of all such incidents shall be maintained, including complete documentation justifying the emergency action, which shall be signed by the physician requesting the procedure.

## Subpart I—Records and Reports

### §606.160 Records.

- (a)(1) Records shall be maintained concurrently with the performance of each significant step in the collection, processing, compatibility testing, storage and distribution of each unit of blood and blood components so that all steps can be clearly traced. All records shall be legible and indelible, and shall identify the person performing the work, include dates of the various entries, show test results as well as the interpretation of the results, show the expiration date assigned to specific products, and be as detailed as necessary to provide a complete history of the work performed.
- (2) Appropriate records shall be available from which to determine lot numbers of supplies and reagents used for specific lots or units of the final product.
- (b) Records shall be maintained that include, but are not limited to, the following when applicable:
  - (1) Donor records:
- (i) Donor selection, including medical interview and examination and where applicable, informed consent.